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MS AF
REPLY UNDER 37 C.F.R. § 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP

AMEN	Docket No. 2993-0115P									
Application No. 10/734,232-Conf. #8618		Filing December	i	Examiner M. A. Marches						
Applicant(s): Yuzh			· · · · · · · · · · · · · · · · · · ·							
	OLYMERIC O	RGANIC PAR	TICLES FOR	CHEMICAL MECH	ANICAL					
MS AF Commissioner for P P.O. Box 1450 Alexandria, VA 223 Transmitted herey	13-1450 vith is an ame									
The fee has been calculated and is transmitted as shown below. CLAIMS AS AMENDED										
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate						
Total Claims	19	- 23 =	0	х						
Independent Claims	2	- 3 =	0	×						
Multiple Dependent Claims (check if applicable)										
Other fee (please specify): Extension for response within first month						120.00				
TOTAL ADDITION		120.00								
No additional fee is required for this amendment. Please charge Deposit Account No in the amount of \$ A duplicate copy of this sheet is enclosed. X A check in the amount of \$ 120.00 to cover the filing fee is enclosed. Payment by credit card. Form PTO-2038 is attached. X The Director is hereby authorized to charge and credit Deposit Account No 02-2448 as described below. A duplicate copy of this sheet is enclosed. X Credit any overpayment Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. Dated: September 20, 2005 John W. Bailey										
8110 Gatehouse Suite 100 East P.O. Box 747 Falls Church, Vii (703) 205-8000	e Rd									

PTO/SB/17 (12-04v2) Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Effective on 12/08/2004. oursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/734,232-Conf. #8618 Application Number TRANSMITTAL Filing Date December 15, 2003 Yuzhuo Li First Named Inventor For FY 2005 M. A. Marcheschi Examiner Name Applicant claims small entity status. See 37 CFR 1.27 1755 Art Unit 2993-0115P TOTAL AMOUNT OF PAYMENT 120.00 (\$) Attorney Docket No. METHOD OF PAYMENT (check all that apply) None Other (please identify): x Check Credit Card Money Order Birch, Stewart, Kolasch & Birch, LLP Deposit Account Number: 02-2448 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayment of Credit any overpayments х fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FEES FILING FEES SEARCH FEES Small Entity Small Entity Small Entity** Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 250 200 100 Design 200 100 100 50 130 65 300 160 80 Plant 200 100 150 Reissue 300 150 500 250 600 300 Provisional 200 100 O 0 0 0 **Small Entity** 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims** Fee Paid (\$) **Multiple Dependent Claims Extra Claims** Fee (\$) Fee (\$) Fee Paid (\$) Fee Paid (\$) Indep. Claims **Extra Claims** Fee (\$)

3 =	x	=							
3. APPLICATION SIZE	FEE								
If the specification ar	nd drawings exce	ed 100 sheets of	f paper (excluding electronically filed	sequence of	r compu	iter			
listings under 37 (CFR 1.52(e)), the	application size	e fee due is \$250 (\$125 for small entity	y) for each	addition	al 50			
sheets or fraction	thereof. See 35	U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						
Total Sheets	Extra Sheets	Number o	f each additional 50 or fraction thereof	Fee (\$)	<u> </u>	Fee Paid (\$)			
100	=	/50	(round up to a whole number) x		=				
4. OTHER FEE(S)						ees Paid (\$)			
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filling surcharge): 1251 Extension for response within first month						120.00			
SUBMITTED BY	1 6	>		*					

Signature

Registration No. (Attorney/Agent)

Name (Print/Type)

Ohn W. Bailey

Registration No. (Attorney/Agent)

Date

September 20, 2005